# **APPLICATION DATA SHEET**

### APPLICATION INFORMATION

Application Number:: 10/088,072
Application Date:: 03/20/02
Application Type:: REGULAR
Subject Matter:: UTILITY

CD-ROM or CD-R?:: NONE

Title:: RHODAMINE DERIVATIVES FOR

PHOTODYNAMIC DIAGNOSIS AND

TREATMENT

Attorney Docket Number:: 220303US0XPCT

## INVENTOR INFORMATION

Applicant Authority Type:: <u>INVENTOR</u>
Primary Citizenship Country:: Canada

Status:: <u>FULL CAPACITY</u>

Given Name:: Denis-Claude Family Name:: Roy

City of Residence::

State or Province of Residence::

Country of Residence::

Canada

Street of Mailing Address:: 2444 Prudential

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Canada

Postal or Zip Code of Mailing Address::

H7K 2C4

Applicant Authority Type:: <u>INVENTOR</u>
Primary Citizenship Country:: <u>Canada</u>

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Martin

Guimond

Montreal

Quebec

Canada

Street of Mailing Address:: 7004 Paul Letondal St.

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Montreal

Quebec

Canada

H1E 5P2

SEP 3 0 2002 TECH CENTER 1600/2900

SED 2 A 2002

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Middle Name::

Family Name:: City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::
State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

INVENTOR
Canada
FULL CAPACITY

FULL CAPACITY
Nestor

<u>A.</u> <u>Molfino</u>

Westmont

<u>Quebec</u>

<u>Canada</u> 530 Victoria Avenue

Westmont

Quebec Canada

H3Y 2R5

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

<u>22850</u>

REPRESENTATIVE INFORMATION

Representative Customer Number::

22850

## DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/CA00/01142	10/03/00
PCT/CA00/01142	Non-Provisional of	60/157,790	10/05/99

### ASSIGNMENT INFORMATION

Assignee Name::

<u>Universite de Montreal</u> 2900 Edouard-Montpetit

Street of Mailing Address:: City of Mailing Address::

State or Province of Mailing Address::

State or Province of Mailing Address::
Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Montreal Quebec

<u>Canada</u>

<u>H3T 1J4</u>

Assignee Name::

Hopital Maisonneuve-Rosemont

Street of Mailing Address:: City of Mailing Address::

5415, boul. de l'Assomption Montreal

State or Province of Mailing Address::

<u>Quebec</u>

Country of Mailing Address::

<u>Canada</u>

Postal or Zip Code of Mailing Address::

H1T 2M4